

Form 1040

Department of the Treasury - Internal Revenue Service

## U.S. Individual Income Tax Return

(99)

2018

EXTENSION

GRANTED TO 10/15/19

OMB No. 1545-0074

IRS Use Only - Do not write or staple in this space.

Filing status:

☐ Single☒ Married filing jointly☐ Married filing separately☐ Head of household☐ Qualifying widow(er)

Your first name and initial

JAY ROBERT

Last name

PRITZKER

Your social security number

Your standard deduction:

☐ Someone can claim you as a dependent☐ You were born before January 2, 1954☐ You are blind

If joint return, spouse's first name and initial

MARY KATHRYN

Last name

PRITZKER

Spouse's social security number

Spouse standard deduction:

☐ Someone can claim your spouse as a dependent☐ Spouse was born before January 2, 1954☒ Full-year health care coverage or exempt (see inst.)☐ Spouse is blind☐ Spouse itemizes on a separate return or you were dual-status alien

Home address (number and street). If you have a P.O. box, see instructions.

111 S. WACKER DRIVE, SUITE 4000

Apt. no.

Presidential Election Campaign. (see inst.)

City, town or post office, state, and ZIP code. If you have a foreign address, attach Schedule 6.

CHICAGO, IL 60606

☐ You ☐ Spouse  
If more than four dependents, see inst. and / here

Dependents (see instructions):

(1) First name

Last name

(2) Social security number

(3) Relationship to you

(4) / if qualifies for (see inst.):

Child tax credit

Credit for other dependents

THEODORA K PRITZKER

DONALD N PRITZKER

DAUGHTER

SON

Sign

Here

Joint return? See instructions. Keep a copy for your records.

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature

Date

Your occupation

Spouse's signature. If a joint return, both must sign.

Date

Spouse's occupation

If the IRS sent you an Identity Protection PIN, enter it here

If the IRS sent you an Identity Protection PIN, enter it here

Paid Preparer Use Only

Preparer's name

Preparer's signature

PTIN

Firm's EIN

Check if:

☒ 3rd Party Designee  
☐ Self-employed

Firm's name

DELOITTE TAX LLP  
180 EAST BROAD STREET  
COLUMBUS, OH 43215

Phone no.

(614) 221-1000

Firm's address

LHA For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form 1040 (2018)

24 Total tax from Page 1, Line 23.

**Step 8: Payments and Refundable Credit**

25 Illinois Income Tax withheld. **Attach** Schedule IL-WIT.

26 Estimated payments from Forms IL-1040-ES and IL-505-I,  
including any overpayment applied from a prior year return.

27 Pass-through withholding. **Attach** Schedule K-1-P or K-1-T.

28 Earned Income Credit from Sch. IL-E/EIC, Step 4, Line 8. **Attach** Sch. IL-E/EIC.

29 Total payments and refundable credit. Add Lines 25 through 28.

24 215,885 .00

25 .00

26 634,850 .00

27 .00

28 .00

**Step 9: Total**

29 634,850 .00

30 If Line 29 is greater than Line 24, subtract Line 24 from Line 29.

30 418,965 .00

31 If Line 24 is greater than Line 29, subtract Line 29 from Line 24.

31 .00

**Step 10: Underpayment of Estimated Tax Penalty and Donations - Only complete Step 10 for late-payment penalty  
for underpayment of estimated tax or to make a voluntary charitable donation.**

32 Late-payment penalty for underpayment of estimated tax

32 19,144 .00

a Check if at least two-thirds of your federal gross income is from farming.

b Check if you or your spouse are 65 or older and permanently living in a nursing home.

c Check if your income was not received evenly during the year and you annualized your income on Form IL-2210.  
**Attach** Form IL-2210.

d Check if you were not required to file an Illinois Individual Income Tax return in the previous tax year.

33 Voluntary charitable donations. **Attach** Schedule G.

33 .00

34 Total penalty and donations. Add Lines 32 and 33.

34 19,144 .00

**Step 11: Refund**

35 If you have an amount on Line 30 and this amount is greater than Line 34, subtract Line 34 from Line 30.  
This is your **overpayment**.

35 399,821 .00

36 Amount from Line 35 you want **refunded to you**. Check one box on Line 37. See instructions.

36 0 .00

37 I choose to receive my refund by

a ☐ **direct deposit** - Complete the information below if you check this box.

Routing number

Checking or

Savings

Account number

b Illinois Individual Income Tax refund debit card.

c paper check.

38 Amount to be **credited forward**. Subtract Line 36 from Line 35. See instructions.

38 399,821 .00

**Step 12: Amount You Owe**

39 If you have an amount on Line 31, add Lines 31 and 34. - or -

If you have an amount on Line 30 and this amount is less than Line 34,  
subtract Line 30 from Line 34. This is the **amount you owe**. See instructions.

39 .00

**Step 13:** If this is a joint return, both you and your spouse must sign below.

Under penalties of perjury, I state that I have examined this return and, to the best of my knowledge, it is true, correct, and complete.

Sign Here	Your signature	Date (mm/dd/yyyy)	Spouse's signature	Date (mm/dd/yyyy)	Daytime phone number
Paid Preparer Use Only	Print/type paid preparer's name		Paid preparer's signature	10/8/19	Check if self-employed <input type="checkbox"/> Paid Preparer's PTIN
	Firm's name	DELOITTE TAX LLP	Firm's FEIN		
	Firm's address	180 EAST BROAD STREET	Firm's phone	614 221 1000	
Third Party Designee	Designee's name (please print)		Designee's phone number	614 221 1000	<input checked="" type="checkbox"/> Check if the Department may discuss this return with the third party designee shown in this step.

☐ If no payment enclosed, mail to:  
ILLINOIS DEPARTMENT OF REVENUE  
SPRINGFIELD IL 62719-0001

☐ If payment enclosed, mail to:  
ILLINOIS DEPARTMENT OF REVENUE  
SPRINGFIELD IL 62726-0001

ID: 2BX

DR \_\_\_\_\_ AP \_\_\_\_\_ RR DC IR ID

849002 01-17-19

IL-1040 page 2 (R-12/18)





Illinois Department of Revenue  
2018 Form IL-1040

Individual Income Tax Return

or for fiscal year ending \_\_\_\_\_

Over 80% of taxpayers file electronically. It is easy and you will get your refund faster. Visit [tax.illinois.gov](http://tax.illinois.gov).

Step 1: Personal Information

JAY ROBERT PRITZKER  
MARY KATHRYN PRITZKER  
111 S WACKER DRIVE SUITE 4000  
CHICAGO, IL 60606

- B Filing status: ☐ Single or head of household ☒ Married filing jointly ☐ Married filing separately ☐ Widowed  
C Check if someone can claim you, or your spouse if filing jointly, as a dependent. See instructions. ☐ You ☐ Spouse  
D Check the box if this applies to you during 2018: ☐ Nonresident - Attach Sch. NR ☐ Part-year resident - Attach Sch. NR

Step 2: Income

- 1 Federal adjusted gross income from your federal Form 1040, Line 7. (Whole dollars only)  
2 Federally tax-exempt interest and dividend income from your federal Form 1040, Line 2a.  
3 Other additions. Attach Schedule M.  
4 Total income. Add Lines 1 through 3.
- |   |           |     |
|---|-----------|-----|
| 1 | 6,027,480 | .00 |
| 2 | 4,328     | .00 |
| 3 | 150,368   | .00 |
| 4 | 6,182,176 | .00 |

Step 3: Base Income

- 5 Social Security benefits and certain retirement plan income received if included in Line 1. Attach Page 2 of federal return.  
6 Illinois Income Tax overpayment included in federal Form 1040, Sch. 1, Line 10.  
7 Other subtractions. Attach Schedule M.  
Check if Line 7 includes any amount from Schedule 1299-C. ☐  
8 Add Lines 5, 6, and 7. This is the total of your subtractions.  
9 Illinois base income. Subtract Line 8 from Line 4.
- |   |           |     |
|---|-----------|-----|
| 5 |           | .00 |
| 6 |           | .00 |
| 7 | 1,820,871 | .00 |
| 8 | 1,820,871 | .00 |
| 9 | 4,361,305 | .00 |

Step 4: Exemptions

- 10 a Enter the exemption amount for yourself and your spouse. See instructions. a \_\_\_\_\_ .00  
b Check if 65 or older: ☐ You + ☐ Spouse # of checkboxes X \$1,000 = b \_\_\_\_\_ .00  
c Check if legally blind: ☐ You + ☐ Spouse # of checkboxes X \$1,000 = c \_\_\_\_\_ .00  
d If you are claiming dependents, enter the amount from Schedule IL-E/EIC, Step 2, Line 1. Attach Schedule IL-E/EIC.  
Exemption allowance. Add Lines a through d. d \_\_\_\_\_ .00

Step 5: Net Income and Tax

- 11 Residents: Net income. Subtract Line 10 from Line 9.  
Nonresidents and part-year residents: Enter the Illinois net income from Sch. NR. Attach Sch. NR.  
12 Residents: Multiply Line 11 by 4.95% (.0495). Cannot be less than zero.  
Nonresidents and part-year residents: Enter the tax from Schedule NR.  
13 Recapture of investment tax credits. Attach Schedule 4255.  
14 Income tax. Add Lines 12 and 13. Cannot be less than zero.
- |    |           |     |
|----|-----------|-----|
| 11 | 4,361,305 | .00 |
| 12 | 215,885   | .00 |
| 13 |           | .00 |
| 14 | 215,885   | .00 |

Step 6: Tax After Nonrefundable Credits

- 15 Income tax paid to another state while an Illinois resident. Attach Sch. CR. 15 \_\_\_\_\_ .00  
16 Property tax and K-12 education expense credit amount from Schedule ICR. Attach Schedule ICR. 16 \_\_\_\_\_ .00  
17 Credit amount from Schedule 1299-C. Attach Schedule 1299-C. 17 \_\_\_\_\_ .00  
18 Add Lines 15, 16, and 17. This is the total of your credits. Cannot exceed the tax amount on Line 14. 18 \_\_\_\_\_ .00  
19 Tax after nonrefundable credits. Subtract Line 18 from Line 14. 19 215,885 .00

Step 7: Other Taxes

- 20 Household employment tax. See instructions.  
21 Use tax on internet, mail order, or other out-of-state purchases from UT Worksheet or UT Table in the instructions. Do not leave blank.  
22 Compassionate Use of Medical Cannabis Pilot Program Act Surcharge.  
23 Total Tax. Add Lines 19, 20, 21, and 22.
- |    |         |     |
|----|---------|-----|
| 20 |         | .00 |
| 21 | 0       | .00 |
| 22 |         | .00 |
| 23 | 215,885 | .00 |



**SCHEDULE 5  
(Form 1040)**

Department of the Treasury  
Internal Revenue Service

**Other Payments and Refundable Credits**

OMB No. 1545-0074

**2018**  
Attachment  
Sequence No. **05**

▶ Attach to Form 1040.  
▶ Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information.

Name(s) shown on Form 1040

**JAY ROBERT & MARY KATHRYN PRITZKER**

Your social security number

<b>Other</b>	65	Reserved		65	
<b>Payments</b>	66	2018 estimated tax payments and amount applied from 2017 return	STMT 12	66	3,428,805.
<b>and</b>	67 a	Reserved		67a	
<b>Refundable</b>	b	Reserved		67b	
<b>Credits</b>	68-69	Reserved		68-69	
	70	Net premium tax credit. Attach Form 8962		70	
	71	Amount paid with request for extension to file (see instructions)		71	1,087,500.
	72	Excess social security and tier 1 RRTA tax withheld		72	
	73	Credit for federal tax on fuels. Attach Form 4136		73	
	74	Credits from Form: a <input type="checkbox"/> 2439 b <input type="checkbox"/> Reserved c <input type="checkbox"/> 8885 d <input type="checkbox"/>		74	
	75	Add the amounts in the far right column. These are your total other payments and refundable credits. Enter here and include on Form 1040, line 17		75	4,516,305.

LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 5 (Form 1040) 2018

**SCHEDULE 4**  
**(Form 1040)**

Department of the Treasury  
Internal Revenue Service

**Other Taxes**

▶ Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information.

OMB No. 1545-0074

**2018**  
Attachment  
Sequence No. **04**

Name(s) shown on Form 1040

**JAY ROBERT & MARY KATHRYN PRITZKER**

Your social security number

**Other  
Taxes**

57	Self-employment tax. Attach Schedule SE	57	15,268.
58	Unreported social security and Medicare tax from: Form a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919	58	
59	Additional tax on IRAs, other qualified retirement plans, and other tax-favored accounts. Attach Form 5329 if required	59	
60 a	Household employment taxes. Attach Schedule H	60a	
b	Repayment of first-time homebuyer credit from Form 5405. Attach Form 5405 if required	60b	
61	Health care: individual responsibility (see instructions)	61	
62	Taxes from: a <input type="checkbox"/> Form 8959 b <input checked="" type="checkbox"/> Form 8960	62	204,474.
	c <input type="checkbox"/> Instructions; enter code(s)		
63	Section 965 net tax liability installment from Form 965-A	63	
64	Add the amounts in the far right column. These are your <b>total other taxes</b> . Enter here and on Form 1040, line 14	64	219,742.

LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 4 (Form 1040) 2018



**SCHEDULE 3**  
**(Form 1040)**

Department of the Treasury  
Internal Revenue Service

**Nonrefundable Credits**

▶ Attach to Form 1040.  
▶ Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information.

OMB No. 1545-0074

**2018**  
Attachment  
Sequence No. **03**

Name(s) shown on Form 1040

**JAY ROBERT & MARY KATHRYN PRITZKER**

Your social security number

<b>Nonrefundable Credits</b>	<b>48</b>	Foreign tax credit. Attach Form 1116 if required	<b>48</b>	
	<b>49</b>	Credit for child and dependent care expenses. Attach Form 2441	<b>49</b>	
	<b>50</b>	Education credits from Form 8863, line 19	<b>50</b>	
	<b>51</b>	Retirement savings contributions credit. Attach Form 8880	<b>51</b>	
	<b>52</b>	Reserved	<b>52</b>	
	<b>53</b>	Residential energy credit. Attach Form 5695	<b>53</b>	
	<b>54</b>	Other credits from Form a <input checked="" type="checkbox"/> 3800 b <input checked="" type="checkbox"/> 8801 c <input type="checkbox"/>	<b>54</b>	
	<b>55</b>	Add the amounts in the far right column. Enter here and include on Form 1040, line 12	<b>55</b>	<b>53,382.</b>

LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 3 (Form 1040) 2018

**SCHEDULE 2  
(Form 1040)**

Department of the Treasury  
Internal Revenue Service

**Tax**

► Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information. ► Attach to Form 1040.

OMB No. 1545-0074

**2018**  
Attachment  
Sequence No. **02**

Name(s) shown on Form 1040

**JAY ROBERT & MARY KATHRYN PRITZKER**

Your social security number

<b>Tax</b>	<b>38-44</b>	Reserved .....	<b>38-44</b>	
	<b>45</b>	Alternative minimum tax. Attach Form 6251 .....	<b>45</b>	0.
	<b>46</b>	Excess advance premium tax credit repayment. Attach Form 8962 .....	<b>46</b>	
	<b>47</b>	Add the amounts in the far right column. Enter here and include on Form 1040, line 11 .....	<b>47</b>	0.

LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 2 (Form 1040) 2018

**SCHEDULE 1**  
**(Form 1040)**

Department of the Treasury  
Internal Revenue Service

**Additional Income and Adjustments to Income**

Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information.

OMB No. 1545-0074

**2018**  
Attachment  
Sequence No. **01**

Name(s) shown on Form 1040

**JAY ROBERT & MARY KATHRYN PRITZKER**

Your social security number

<b>Additional Income</b>	1-9b	Reserved		STATEMENT 9	1-9b	
	10	Taxable refunds, credits, or offsets of state and local income taxes		STATEMENT 10	10	1,354,733.
	11	Alimony received			11	
	12	Business income or (loss). Attach Schedule C or C-EZ			12	93,711.
	13	Capital gain or (loss). Attach Schedule D if required. If not required, check here	<input type="checkbox"/>		13	-3,000.
	14	Other gains or (losses). Attach Form 4797			14	-74,964.
	15a	Reserved			15b	
	16a	Reserved			16b	
	17	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E			17	-185,522.
	18	Farm income or (loss). Attach Schedule F			18	14,346.
	19	Unemployment compensation			19	
	20a	Reserved			20b	
	21	Other income. List type and amount	STATEMENT 8		21	368,893.
	22	Combine the amounts in the far right column. If you don't have any adjustments to income, enter here and include on Form 1040, line 6. Otherwise, go to line 23			22	1,568,197.
<b>Adjustments to Income</b>	23	Educator expenses	23			
	24	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106	24			
	25	Health savings account deduction. Attach Form 8889	25			
	26	Moving expenses for members of the Armed Forces. Attach Form 3903	26			
	27	Deductible part of self-employment tax. Attach Schedule SE	27	7,634.		
	28	Self-employed SEP, SIMPLE, and qualified plans	28			
	29	Self-employed health insurance deduction	29	27,705.		
	30	Penalty on early withdrawal of savings	30			
	31a	Alimony paid b Recipient's SSN	31a			
	32	IRA deduction	32			
	33	Student loan interest deduction	33			
	34	Reserved	34			
	35	Reserved	35			
	36	Add lines 23 through 35			36	35,339.

LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 1 (Form 1040) 2018



## JAY ROBERT &amp; MARY KATHRYN PRITZKER

Page 2

Attach Form(s) W-2. Also attach Form(s) W-2G and 1099-R if tax was withheld.

Standard Deduction for -  
 • Single or married filing separately, \$12,000  
 • Married filing jointly or Qualifying widow(er), \$24,000  
 • Head of household, \$18,000  
 • If you checked any box under Standard deduction, see instructions.

1	Wages, salaries, tips, etc. Attach Form(s) W-2		1		
2a	Tax-exempt interest	2a	127,706.	b Taxable interest	
3a	Qualified dividends	3a	648,661.	b Ordinary dividends	
4a	IRAs, pensions, and annuities	4a		b Taxable amount	
5a	Social security benefits	5a		b Taxable amount	
6	Total income. Add lines 1 through 5. Add any amount from Schedule 1, line 22		1,568,197.	6	6,062,819.
7	Adjusted gross income. If you have no adjustments to income, enter the amount from line 6; otherwise, subtract Schedule 1, line 36, from line 6			7	6,027,480.
8	Standard deduction or itemized deductions (from Schedule A)			8	476,766.
9	Qualified business income deduction (see instructions)			9	131.
10	Taxable income. Subtract lines 8 and 9 from line 7. If zero or less, enter -0-			10	5,550,583.
11	a Tax (see inst.)	1,882,822.	(check if any from: 1 Form 8814 2 Form 4972 3 )	11	1,882,822.
12	b Add any amount from Schedule 2 and check here			12	53,382.
13	a Child tax credit/credit for other dependents			13	1,829,440.
14	Subtract line 12 from line 11. If zero or less, enter -0-			14	219,742.
15	Other taxes. Attach Schedule 4			15	2,049,182.
16	Total tax. Add lines 13 and 14			16	
17	Refundable credits: a EIC (see inst.) b Sch 8812 c Form 8863			17	4,516,305.
18	Add any amount from Schedule 5	4,516,305.		18	4,516,305.
19	Add lines 16 and 17. These are your total payments			19	2,467,123.
20a	If line 18 is more than line 15, subtract line 15 from line 18. This is the amount you overpaid			20a	
21	Amount of line 19 you want refunded to you. If Form 8888 is attached, check here				
22	Routing number				
23	d Account number				
24	e Type: Checking Savings				
25	Amount of line 19 you want applied to your 2019 estimated tax	21	2,467,123.		
26	Amount you owe. Subtract line 18 from line 15. For details on how to pay, see instructions				
27	Estimated tax penalty (see instructions)	23			

## Refund

Direct deposit? See instructions.

Amount You Owe

Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information.

Form 1040 (2018)